UNITED STATES DISTRICT COURT WESTERN DISTRICT OF LOUISIANA LAFAYETTE DIVISION

910 E MAIN LLC D/B/A QUARTER	CIVIL ACTION NO
TAVERN; BUBBA'S SALOON, LLC;	
CJD III LLC D/B/A TWISTED TAVERN;	
DOUG MCCARTHY ENTERPRISES INC.	
D/B/A 501; EMERALD BILLIARDS, L.L.C.;	DISTRICT JUDGE
MULLIGAN'S ON THE TECHE, L.L.C.	
D/B/A CANTINA'S DOWNTOWN; MY	
PLACE BAR & GRILL, L.L.C.;	
NAPOLEONS ON THE TECHE, LLC; POOL	MAGISTRATE JUDGE
DO'S SPORTS BAR LLP; SOCO SPORTS	
BAR, LLC; YED ENTERPRISES LLC D/B/A	
DEWEY'S LOUNGE	
	JURY DEMAND

VERSUS

JOHN BEL EDWARDS, IN HIS OFFICIAL CAPACITY AS GOVERNOR OF THE STATE OF LOUISIANA; AND H. "BUTCH" BROWNING, JR., IN HIS OFFICIAL CAPACITY AS FIRE MARSHAL OF THE STATE OF LOUISIANA

EXHIBIT H



STATE REPORT | 07.26.2020

SUMMARY

- Louisiana is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for test positivity, indicating a rate above 10%
- Louisiana has seen stability in new cases and a decrease in testing positivity over the past week.
- The following three parishes had the highest number of new cases over the past 3 weeks: 1. East Baton Rouge Parish, 2. Jefferson Parish, and 3. Calcasieu Parish. These parishes represent 24.9 percent of new cases in Louisiana.
- The federal government has deployed the following staff as assets to support the state response: 10 to support operations
 activities from FEMA; 3 to support operations activities from ASPR; 9 to support epidemiology activities from CDC; 1 to support operations activities from CDC; 37 to support operations activities from USCG; and 10 to support medical activities from VA
- During Jul 18 Jul 24, on average, 166 patients with confirmed COVID-19 and 73 patients with suspected COVID-19 were this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

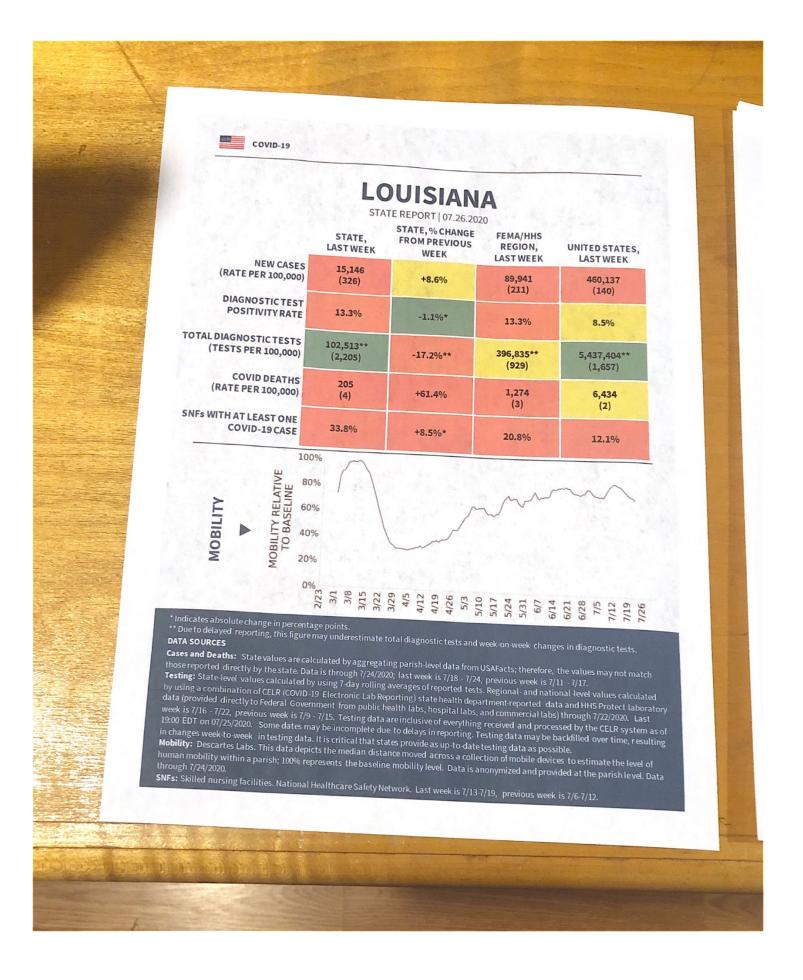
- Protect those in nursing home, assisted living, and long-term care facilities by assuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.

- · Encourage individuals that have participated in any large social gatherings to get tested.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely
- Monitor testing data to identify additional sites of increased transmission and focus public health resources on them.
- · For families and cohabiting households, screen entire households in a single test by pooling specimens.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.

that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

^{*} This figure may differ from state data due to differences in hospital lists between federal and state systems or indusion of hospitals that are not admitting COVID-19 patients. We are working to incorporate feedback on an ongoing basis to update these figures. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals.







STATE REPORT | 07.26.2020

COVID-19 PARISH AND METRO ALERTS

LOCALITIES IN RED ZONE LOCALITIES IN YELLOW ZONE

METRO AREA (CBSA) LAST WEEK	17 Top 12 shown (full list below)	Baton Rouge Lafayette Lake Charles Shreveport-Bossier City Houma-Thibodaux Monroe Hammond Opelousas Alexandria Morgan City Fort Polk South DeRidder	2	New Orleans-Metairie Jennings
PARISH LAST WEEK	51 Top 12 shown (full list below)	East Baton Rouge Jefferson Calcasieu Lafayette Caddo St. Tammany Ouachita Tangipahoa Terrebonne Acadia Livingston St. Landry	10	Orleans Jefferson Davis Franklin Madison Morehouse Winn Plaquemines Union Claiborne East Carroll

All Red CBSAs: Baton Rouge, Lafayette, Lake Charles, Shreveport-Bossier City, Houma-Thibodaux, Monroe, Hammond, Opelousas, Alexandria, Morgan City, Fort Polk South, DeRidder, Bogalusa, Minden, Natchitoches, Ruston, Natchez

All Red Parishes: East Baton Rouge, Jefferson, Calcasieu, Lafayette, Caddo, St. Tammany, Ouachita, Tangipahoa, Terrebonne, Acadia, Livingston, St. Landry, Iberia, Lafourche, Rapides, Ascension, Bossier, Vermilion, St. Mary, Allen, St. Martin, Avoyelles, Evangeline, St. Charles, Vernon, Beauregard, Washington, Sabine, Webster, Pointe Coupee, St. Bernard, Natchitoches, Lincoln, Iberville, St. John the Baptist, Richland, West Baton Rouge, De Soto, St. James, Grant, Jackson, Assumption, Bienville, St. Helena, Concordia, Red Ri ver, Cameron, West Carroll, Caldwell, Catahoula, Tensas

Red Zone: Those core-based statistical areas (CBSAs) and parishes that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and parishes that during the last week reported both new cases between 10 100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating parish-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/24/2020; last week is 7/18 - 7/24, three weeks is 7/4 - 7/24.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/22/2020. Last week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including
- Reduce your public interactions and activities to 25% of your normal activity

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- Diagnostic pooling: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- Surveillance pooling: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

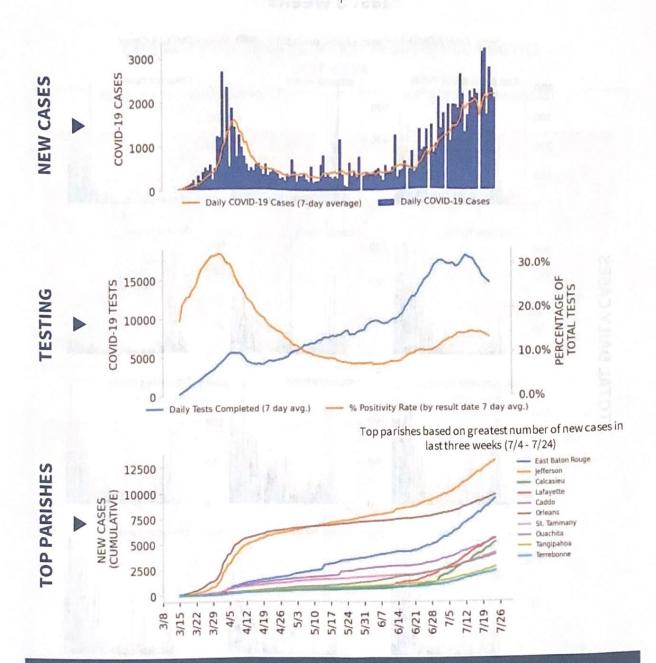
Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- · Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- Diagnostic pooling: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- Surveillance pooling: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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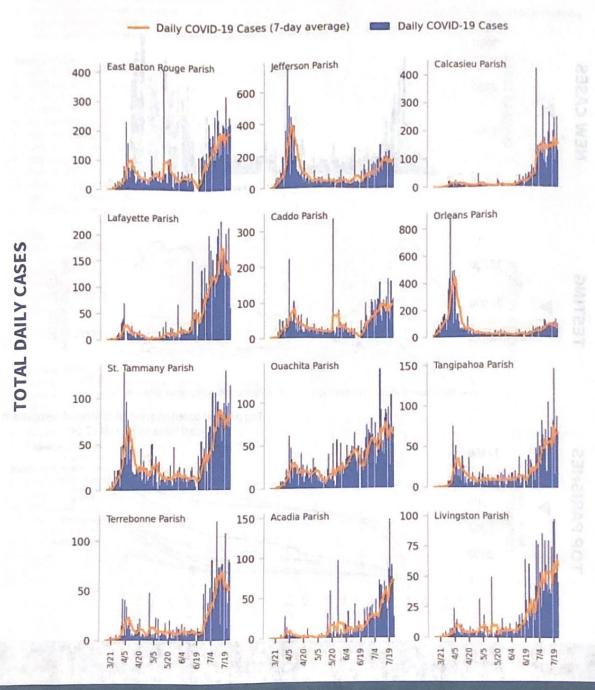


DATA SOURCES

Cases: Parish-level data from USAFacts. State values are calculated by aggregating parish-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/24/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/22/2020.

Top 12 parishes based on number of new cases in the last 3 weeks



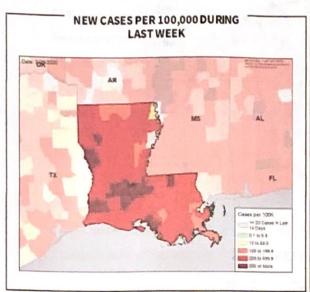
DATA SOURCES

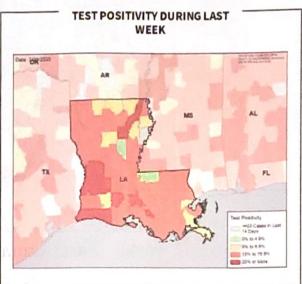
Cases: Parish-level data from USAFacts through 7/24/2020. Last 3 weeks is 7/4 - 7/24.

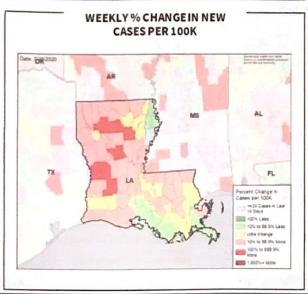


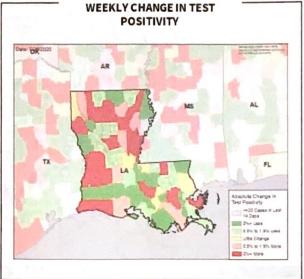
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CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK









DATA SOURCES

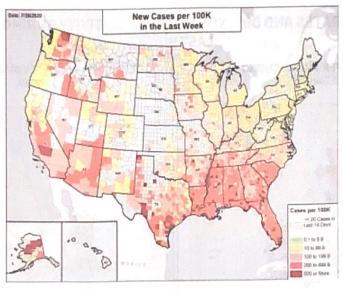
Cases: Parish-level data from USAFacts through 7/24/2020. Last week is 7/18 - 7/24, previous week is 7/11 - 7/17.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/22/2020. Last week is 7/16 - 7/22, previous week is 7/9 - 7/15. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

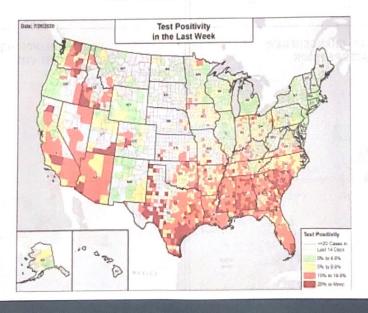


National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/24/2020. Last week is 7/18 - 7/24.

Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/22/2020. Last week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

iviethods

COLOR THRESHOLDS: Results for each indicator should be taken in context

	New cases per 100	ses per 100,000 population per use Change in Context of the findings					
1	New cases per 100,000 population per week	Green	ume)	findings			
	per 100,000 per	<10	Yellow	Red			
	0 111 [190]	<-10%	10-100	>100			
	Total diagnostic tests results	<5%	-10% - 10% 5%-10%	>10%			
	Total diagnostic tests resulted per 100,000 population Percent change in test	<-0.5%	-0.5%-0.5%	>10%			
	Percent change in tests per 100,000 population COVID-19 deaths per 100,000 population	>1000	500-1000	>0.5% <500			
	COVID-19 deaths per 100,000 population Percent change in deaths per 100,000	>10%	-10% - 10%	500			
	Percent change in deaths per 100,000 population per week Skilled Nursing Facilities with	<0.5	0.5-2	<-10%			
	Skilled Nursing Facilities with at least one COVID-19 case	<-10%	-10% - 10%	>2			
	DATA NOTES case		0.1%-5%	>5%			
	Cases and deaths: County-level data from the aggregating	<-0.5%	-0.5%-0.5%	>0.5%			

- Cases and deaths: County-level data from USAFacts as of 14:00 EDT on 07/26/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the aggregating country-revertigate moin observation, therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted,
- Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe county level to talk when able to be disaggregated from serology test results and to describe countylevel totals state-level totals when able to be disaggregated from serology test results and to describe county-level totals when able to be disaggregated from serology test results and to describe county-level totals are information in available on patients' county of recidence or healthcare providers' practice location. Here when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/16 to 7/22; previous week data are from 7/9 to 7/15. HHS Protect data is recent as of 13:30 EDT on 07/26/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 07/25/2020. Testing data are inclusive or everything rece resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as
- Mobility: Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent
- Hospitalizations: Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Data is recent as of 13:10 EDT on 07/25/2020.
- Skilled Nursing Facilities: National Healthcare Safety Network (NHSN). Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.